Vaughan Gething AC/AM Ysgrifennydd y Cabinet dros Iechyd, Llesiant a Chwaraeon Cabinet Secretary for Health, Well-being and Sport



Eich cyf/Your ref P-04-457/P-04-474 Ein cyf/Our ref VG/06092/16

Mike Hedges AM
Chair - Petitions Committee
National Assembly for Wales
Ty Hywel
Cardiff Bay
Cardiff
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19 September 2016

Dear Mike,

Thank you for your letter of 24 August on behalf of the Petitions Committee regarding funding spiritual care in NHS Wales.

The NHS Spiritual Care Standards were introduced by the Welsh Government in May 2010 under section 47 of the Health and Social Care Community Health and Standards Act 2003. The Standards committed NHS organisations to provide the appropriate funding for spiritual care services to patients, their families, carers and staff.

The Standards were introduced to facilitate the audit of spiritual care services, to ensure equality across services and to develop an integrated approach to the delivery of religious and spiritual care.

Progress on the implementation of the Standards has been good with many of the criteria in each Standard having already been met across all NHS organisations in Wales.

From May 2013, Healthcare Inspectorate Wales (HIW) has been responsible for ensuring NHS organisations are compliant with the Spiritual Care Standards as they are linked to the to *Doing Well, Doing Better – Standards for Health Services in Wales.* HIW undertake testing and validation of the self assessment against the Standards for Healthcare as part of its public assurance role.

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Rydym yn croesawu derbyn gohebiaeth yn Gymraeg. Byddwn yn ateb gohebiaeth a dderbynnir yn Gymraeg yn Gymraeg ac ni fydd gohebu yn Gymraeg yn arwain at oedi.

We welcome receiving correspondence in Welsh. Any correspondence received in Welsh will be answered in Welsh and corresponding in Welsh will not lead to a delay in responding.

In April 2015, the revised Healthcare Standards for NHS Wales incorporated specific reference to spiritual care, standard 4.1 and standard 6.2. Health boards and trusts must comply with the standards as set out and determine for themselves how they will offer such services locally. There is no protected budget line for chaplaincy or spiritual care as provision should come out of the basic allocation to services. Therefore, the health boards and trusts would be using their discretionary revenue allocation to fund the service in their area.

The Welsh Government would not support moving charitable funds for a service that should be part of the standard provision for care as articulated by the Healthcare Standards.

I hope this clarifies the current situation.

Yours sincerely,

Vaughan Gething AC/AM

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